

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 746298

1. Entity Name

CENTRAL ASSEMBLY OF GOD OF AUBURNDAL, INC.

FILED
Mar 02, 2000 8:00 am
Secretary of State

03-02-2000 90183 009 ****61.25

Principal Place of Business

Mailing Address

601 LEMON ST.
P.O. BOX 668
AUBURNDAL FL 33823

601 LEMON ST.
P.O. BOX 668
AUBURNDAL FL 33823-0668

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1859744

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DONAHUE, JOHN P
156 ABUNDANT LIFE DRIVE
AUBURNDAL FL 33823

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	T	<input type="checkbox"/> Delete
NAME	FOX, DIANE	
STREET ADDRESS	2260 PALMVIEW AVENUE	
CITY-ST-ZIP	AUBURNDAL FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	GILMORE, J EARL	
STREET ADDRESS	1206 SUSAN LANE	
CITY-ST-ZIP	AUBURNDAL, FL 00000	
TITLE	S	<input type="checkbox"/> Delete
NAME	DONAHUE, PATRICIA D	
STREET ADDRESS	156 ABUNDANT LIFE DR	
CITY-ST-ZIP	AUBURNDAL FL 33823	
TITLE	D	<input type="checkbox"/> Delete
NAME	SMITH, RAY	
STREET ADDRESS	1207 BURLINGTON COURT	
CITY-ST-ZIP	AUBURNDAL FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	ALBRITTON, ORAIN	
STREET ADDRESS	455 PLYMOUTH RD	
CITY-ST-ZIP	AUBURNDAL FL 33823	
TITLE	P	<input type="checkbox"/> Delete
NAME	DONAHUE, JOHN P	
STREET ADDRESS	156 ABUNDANT LIFE DRIVE	
CITY-ST-ZIP	AUBURNDAL FL	

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
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NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with full legal name empowered.

SIGNATURE:

NOTARIZED REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-21-2000 (863) 967-2876
Date Daytime Phone #

CR2E037 (9/99)